



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)

Summary Sheet

FILED

2011 OCT 21 AM 8:41

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

PEGGY BEAVER  
CLERK

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

16

COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization)

☐ Check if this is a new name

Friends of Jim Brainard Committee

2. Acronym or Abbreviated Name (if any)

3. Committee Telephone Number

( 317 ) 573-9929 (home)

4. Mailing Address (address where all campaign finance correspondence is received)

☐ Check if this is a new address

12662 Royce Court

5. City, State, ZIP Code

Carmel IN 46033

6. Party Affiliation (if applicable)

Republican

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full Name of Candidate (include any nickname)

James Brainard

8. Party Affiliation or If Independent Candidate

9. Office Sought (Include district number, if any. Not required for exploratory committee.)

Mayor of Carmel, Indiana

10. County of Residence Hamilton County

TYPE OF REPORT

11. Check one:

☐ Pre-Primary ☒ Pre-Election ☐ Annual ☐ Nomination ☐ Other

☐ Final/Disbands Committee (lines 18, 19, and 20 must be "0") ☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

CONVENTION CANDIDATES ONLY

Check one:

☐ Pre-Convention

☐ Post-Convention

12. Reporting Period:

From: 4/9/2011

Through: 10/14/2011

COLUMN A  
This Period

COLUMN B  
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

112,311.39

14. Cash on hand and investments January 1, current year.

166,909.69

CONTRIBUTIONS AND RECEIPTS

(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

28,174.60

64,724.60

15b. Unitemized

15c. Add lines 15a and 15b in both columns

SUBTOTAL

28,174.60

64,724.60

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

140,485.99

231,634.29

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

139,947.50

231,095.80

17b. Unitemized

17c. Add lines 17a and 17b in both columns

SUBTOTAL

139,947.50

231,095.80

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

538.49

538.49

19. Debts OWED BY the committee (use Schedule D)

20,289.61

20. Debts OWED TO the committee (use Schedule E)

DECLARATION

I, \_\_\_\_\_, hereby declare under penalty of perjury that the foregoing is true and correct.

Date

10/20/11

Date

10/20/11

or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly who fails to file a complete or accurate report as required by the Indiana may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

2011 OCT 21 AM

PEGGY BEAVER  
CLERK

FILED



**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE.** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 2 of 16

| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)                        | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br>RECEIVED BY |
|--|---|-----------------------------------|--|---------------------------------|
| 1.<br><br>W. A. Ensign<br>1627 Obara Court<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____               | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$75.00                           |  | 04/18/2011                      |
| 2.<br><br>John A. Kite<br>10612 Springmill Road<br>Carmel, IN 46032<br><br>Contributor's Occupation (if required) _____          | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$1,000.00                        |  | 04/18/2011                      |
| 3.<br><br>Keith D. Smith<br>4340 So. Franklin Road<br>Indianapolis, IN 46239<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$300.00                          |  | 04/18/2011                      |
| 4.<br><br>Lawrence C. Arany<br>12967 Camborne Court<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____      | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$50.00                           |  | 04/20/2011                      |
| 5.<br><br>Ike Batalis<br>14490 Jeremy Drive<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____              | Direct  | \$250.00                          |  | 04/22/2011                      |
| SUBTOTAL THIS PAGE OF SCHEDULE A   |   | \$ 1675.00                        |  |                                 |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet)                         |   | \$                                |  |                                 |



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)  
CONTRIBUTIONS BY INDIVIDUALS  
Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE.** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 3 of 16

| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)                              | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br>RECEIVED BY |
|--|---|-----------------------------------|--|---------------------------------|
| 1.<br><br>Mary Jo Wedding<br>5022 St. Charles Place<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____            | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$100.00                          |  | 04/23/2011                      |
| 2.<br><br>Jane Ryker Ansty<br>211 Faulkner Court<br>Apt 104<br>Carmel, IN 46032<br><br>Contributor's Occupation (if required) _____    | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$100.00                          |  | 04/23/2011                      |
| 3.<br><br>Peter F. Episcopo<br>PO 4344<br>Carmel, IN 46082-4344<br><br>Contributor's Occupation (if required) _____                    | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$500.00                          |  | 04/28/2011                      |
| 4.<br><br>David J. Kristoff<br>1040 N. Rangeline Road, Suite B<br>Carmel, IN 46032<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$50.00                           |  | 04/28/2011                      |
| 5.<br><br>Mark A. Zukerman<br>10901 Jasmine Drive<br>Carmel, IN 46032<br><br>Contributor's Occupation (if required) _____              | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$500.00                          |  | 04/30/2011                      |
| SUBTOTAL THIS PAGE OF SCHEDULE A   |   | \$ 1250.00                        |  |                                 |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet)                               |   | \$                                |  |                                 |



**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE.** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 4 of 16

| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)                    | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br>RECEIVED BY |
|--|---|-----------------------------------|--|---------------------------------|
| 1.<br><br>Scott R. Dennis<br>3199 Smokey Ridge Trail<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$300.00                          |  | 04/30/2011                      |
| 2.<br><br>Greg M. Small<br>12441 Creekwood Lane<br>Carmel, IN 46032<br><br>Contributor's Occupation (if required) _____      | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$500.00                          |  | 04/30/2011                      |
| 3.<br><br>Justin Tysdal<br>549 Bolderwood<br>Carmel, IN 46032<br><br>Contributor's Occupation (if required) _____            | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$500.00                          |  | 04/13/2011                      |
| 4.<br><br>Mark Bonnett<br>11504 Lakeshore Drive<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____      | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$500.00                          |  | 04/14/2011                      |
| 5.<br><br>James C. Brocke<br>5940 Chapmans Trail<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____     | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$250.00                          |  | 05/16/2011                      |
| SUBTOTAL THIS PAGE OF SCHEDULE A   |   | \$ 2050.00                        |  |                                 |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet)                     |   | \$                                |  |                                 |



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-1)  
CONTRIBUTIONS BY INDIVIDUALS  
Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE.** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)                      | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED |
|--|---|-----------------------------------|--|------------------|
|  |   |                                   |  | RECEIVED BY      |
| 1.<br><br>Stephen T. Bates<br>5775 Hornbill Place<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____      | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$50.00                           |  | 05/03/2011       |
| 2.<br><br>Mark S. Vollbrecht<br>5184 Carrington Circle<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$500.00                          |  | 05/03/2011       |
| 3.<br><br>Ed Jolliffe<br>9703 Springstone Road<br>McCordsville, IN 46055<br><br>Contributor's Occupation (if required) _____   | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$1,000.00                        |  | 05/27/2011       |
| 4.<br><br>Dave Richter<br>6037 Hollythorn Place<br>Carmel, IN 46033<br><br>Contributor's Occupation (if required) _____        | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$5,000.00                        |  | 06/16/2011       |
| 5.<br><br>Ed Jolliffe<br>9703 Springstone Road<br>McCordsville, IN 46055<br><br>Contributor's Occupation (if required) _____   | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$1,000.00                        |  | 08/29/2011       |
| SUBTOTAL THIS PAGE OF SCHEDULE A   |   | \$ 7550.00                        |  |                  |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet)                       |   | \$                                |  |                  |



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE  
State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1)  
CONTRIBUTIONS BY INDIVIDUALS  
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 6 of 16

| CONTRIBUTOR'S FULL NAME AND OCCUPATION<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)                                       | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br>RECEIVED BY |
|---|---|-----------------------------------|--|---------------------------------|
| 1.<br>Rex Barrett<br>3755 East 82 <sup>nd</sup> Street, Suite 300<br>Indianapolis, IN 46240<br><br>Contributor's Occupation (if required) _____ | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$5,000.00                        |  | 06/22/2011                      |
| 2.<br>Victoria Temple<br>12020 Leighton Ct.<br>Carmel IN 46032<br><br>Contributor's Occupation (if required) _____                              | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____ | \$5,000.00                        |  | 7/20/2011                       |
| 3.<br><br>Contributor's Occupation (if required) _____  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____            |                                   |  |                                 |
| 4.<br><br>Contributor's Occupation (if required) _____  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____            |                                   |  |                                 |
| 5.<br><br>Contributor's Occupation (if required) _____  | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe) _____<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) _____            |                                   |  |                                 |
| SUBTOTAL THIS PAGE OF SCHEDULE A  |   | \$ 10000.00                       |  |                                 |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet)  |   | \$                                |  |                                 |



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE  
State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2)  
CONTRIBUTIONS BY CORPORATIONS  
Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

|              |
|--------------|
| FILE NUMBER  |
|              |
| Page 7 of 16 |

| CONTRIBUTOR'S FULL NAME AND<br>FULL MAILING ADDRESS<br>(street, number, city, state, ZIP code)           | TYPE OF CONTRIBUTION<br>OR OTHER RECEIPT  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE<br>RECEIVED<br>RECEIVED BY |
|--|---|-----------------------------------|--|---------------------------------|
| 1.<br><br>Comcast Financial Agency Corporation<br>1701 JFK Boulevard<br>Philadelphia, PA 19103-2838      | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input checked="" type="checkbox"/> Misc. (specify)<br>Advertising refund | \$149.60                          |  | 07/27/2011                      |
| 2.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)                                  |                                   |  |                                 |
| 3.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)                                  |                                   |  |                                 |
| 4.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)                                  |                                   |  |                                 |
| 5.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)                                  |                                   |  |                                 |
| SUBTOTAL THIS PAGE OF SCHEDULE A   |   | \$ 149.60                         |  |                                 |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet) |   | \$                                |  |                                 |



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**  
State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE A-4)  
CONTRIBUTIONS BY  
POLITICAL ACTION COMMITTEES**  
**Itemized Contributions and Other Receipts**

**INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE.** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees **MUST** be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

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|--|---|-----------------------------------|--|------------------|
|  |   |                                   |  | RECEIVED BY      |
| 1.<br>Home PAC<br>PO 44670<br>Indianapolis, IN 46244   | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) | \$500.00                          |  | 05/03/2011       |
| 2.<br>CD PAC<br>8900 Keystone Crossing, #900<br>Indianapolis, IN 46240                                   | Contributions:<br><input checked="" type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify) | \$5,000.00                        |  | 08/26/2011       |
| 3.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)            |                                   |  |                  |
| 4.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)            |                                   |  |                  |
| 5.   | Contributions:<br><input type="checkbox"/> Direct<br><input type="checkbox"/> In-Kind (describe)<br><br>Other Receipts:<br><input type="checkbox"/> Interest <input type="checkbox"/> Loan<br><input type="checkbox"/> Misc. (specify)            |                                   |  |                  |
| SUBTOTAL THIS PAGE OF SCHEDULE A   |   | \$ 5500.00                        |  |                  |
| TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY<br>(Enter total on ITEM 15a of the Summary Sheet) |   | \$ 28174.60                       |  |                  |



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES**

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (*such as transfers-out from candidate, legislative caucus, political action, or regular party committees*) **MUST** be itemized on this schedule.

FILE NUMBER

Page 9 of 16

| RECIPIENT'S NAME AND MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>                          | RECIPIENT'S OCCUPATION               | TYPE OF EXPENDITURE<br>and<br>PURPOSE <i>(be specific)</i>  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE |
|---|--------------------------------------|---|-----------------------------------|--|------------------------|
|   | OFFICE SOUGHT <i>(if applicable)</i> |   |                                   |  |                        |
| Code <u>  O  </u><br><br>Steve Brumblay<br>520 Lark Drive, Apt 1<br>Carmel, IN 46032                            |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>HQ Staff                     | 350.00                            | 350.00                                 | 4/9/2011               |
| Code <u>  O  </u><br><br>Thomas Haley<br>221 S. Rangeline Rd. Apt 2<br>Carmel, IN 46032                         |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>HQ Staff                     | 370.00                            | 370.00                                 | 4/9/2011               |
| Code <u>  A  </u><br><br>Star Media Advertising<br>307 N Pennsylvania<br>Indianapolis IN 46204                  |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Advertising Newspaper        | 1200.00                           | 1200.00                                | 4/9/2011               |
| Code <u>  A  </u><br>Regal Printing<br>485 Gradle Drive<br>Carmel, IN 46032                                     |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Printing and Mailing         | 2586.82                           | 3610.44                                | 4/13/2011              |
| Code <u>  A  </u><br>Elegan Customwear<br>212 E Lincolnway<br>Valparaiso IN 46383                               |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Volunteer Tee Shirts         | 5228.69                           | 5228.69                                | 4/14/2011              |
| Code <u>  A  </u><br>HGCP<br>5110 Briarstone Trace<br>Carmel IN 46033   |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Advertising Creative Mailing | 15000.00                          | 15000.00                               | 4/14/2011              |
| Code <u>  O  </u><br>Steve Brumblay<br>520 Lark Drive, Apt 1<br>Carmel, IN 46032                                |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>HQ Staff                     | 175.00                            | 525.00                                 | 4/15/2011              |
| SUBTOTAL THIS PAGE OF SCHEDULE B  |                                      |   | \$ 24910.51                       |  |                        |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 17a of the Summary Sheet)</i> |                                      |   | \$                                |  |                        |



**REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE**

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

**(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES**

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (*such as transfers-out from candidate, legislative caucus, political action, or regular party committees*) **MUST** be itemized on this schedule.

FILE NUMBER

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| RECIPIENT'S NAME AND MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>                          | RECIPIENT'S OCCUPATION               | TYPE OF EXPENDITURE<br>and<br>PURPOSE <i>(be specific)</i>   | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE |
|---|--------------------------------------|--|-----------------------------------|--|------------------------|
|   | OFFICE SOUGHT <i>(if applicable)</i> |  |                                   |  |                        |
| Code <u>  F  </u><br>Renaissance North Hotel<br>11925 North Meridian Street<br>Carmel, IN 46032                 |                                      | <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose: Ron Carter Event<br>Event Catering | 1326.20                           | 2279.42                                | 4/15/2011              |
| Code <u>  A  </u><br>CURRENT PUBLISHING, LLC<br>1 South Range Line Road<br>Suite 220<br>Carmel, IN 46032        |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Print Advertising               | 4920.00                           | 4920.00                                | 4/15/2011              |
| Code <u>  A  </u><br>HGCP<br>5110 Briarstone Trace<br>Carmel IN 46033   |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Advertising Creative Mailing    | 20958.80                          | 45958.80                               | 4/15/2011              |
| Code <u>  O  </u><br>Tangent Resource LLC<br>301 E Carmel Drive Ste C-500<br>Carmel IN 46032                    |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Management Fee                  | 5000.00                           | 26659.00                               | 4/18/2011              |
| Code <u>  A  </u><br>Andrew Greider<br>3 Circle Drive<br>Carmel IN 46032  |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Expense Reimbursement           | 1676.12                           | 7826.29                                | 4/19/2011              |
| Code <u>  A  </u><br>HGCP<br>5110 Briarstone Trace<br>Carmel IN 46033   |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Advertising Creative Mailing    | 10000.00                          | 55958.80                               | 4/20/2011              |
| Code <u>  O  </u><br>Andrew Greider<br>3 Circle Drive<br>Carmel IN 46032  |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Management Fee                  | 1158.53                           | 89848.82                               | 4/26/2011              |
| SUBTOTAL THIS PAGE OF SCHEDULE B  |                                      |  | \$ 45039.65                       |  |                        |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 17a of the Summary Sheet)</i> |                                      |  | \$                                |  |                        |



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (*such as transfers-out from candidate, legislative caucus, political action, or regular party committees*) **MUST** be itemized on this schedule.

FILE NUMBER

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| RECIPIENT'S NAME AND MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>                          | RECIPIENT'S OCCUPATION               | TYPE OF EXPENDITURE<br>and<br>PURPOSE <i>(be specific)</i>   | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE |
|---|--------------------------------------|--|-----------------------------------|--|------------------------|
|   | OFFICE SOUGHT <i>(if applicable)</i> |  |                                   |  |                        |
| Code <u>  O  </u><br>American Viewpoint<br>300 N Lee Street Suite 400<br>Alexandria, VA 22314                   |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Polling                 | 10450.00                          |  | 4/27/2011              |
| Code <u>  A  </u><br>Regal Printing<br>485 Gradle Drive<br>Carmel, IN 46032                                     |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Printing and Mailing    | 7339.51                           | 10949.95                               | 4/29/2011              |
| Code <u>  A  </u><br>Allison Hunt Graphic Design<br>6435 Greyridge Blvd.<br>Indianapolis IN 46237               |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Graphic Design Services | 1500.00                           | 1500.00                                | 5/2/5011               |
| Code <u>  A  </u><br>IndyWebExperts<br>14047 Trade Center Drive<br>Suite 252<br>Indianapolis IN 46256           |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Website Consulting      | 3750.00                           | 3750.00                                | 5/2/2011               |
| Code <u>  O  </u><br>Andrew Greider<br>3 Circle Drive<br>Carmel IN 46032  |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Expense Reimbursement   | 910.78                            | 9895.60                                | 5/2/2011               |
| Code <u>  A  </u><br>Redirections Sign and Design<br>5157 East 64th Street<br>Indianapolis IN 46220             |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Signage Services        | 481.50                            | 481.50                                 | 5/2/2011               |
| Code <u>  O  </u><br>Steve Brumblay<br>520 Lark Drive, Apt 1<br>Carmel, IN 46032                                |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>HQ Staff                | 175.00                            | 700.00                                 | 5/2/2011               |
| SUBTOTAL THIS PAGE OF SCHEDULE B  |                                      |  | \$ 24606.79                       |  |                        |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 17a of the Summary Sheet)</i> |                                      |  | \$                                |  |                        |



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (*such as transfers-out from candidate, legislative caucus, political action, or regular party committees*) **MUST** be itemized on this schedule.

|               |
|---------------|
| FILE NUMBER   |
|               |
| Page 12 of 16 |

| RECIPIENT'S NAME AND MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>                          | RECIPIENT'S OCCUPATION               | TYPE OF EXPENDITURE<br>and<br>PURPOSE <i>(be specific)</i>   | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE |
|---|--------------------------------------|--|-----------------------------------|--|------------------------|
|   | OFFICE SOUGHT <i>(if applicable)</i> |  |                                   |  |                        |
| Code __O__<br>Thomas Haley<br>221 S. Rangeline Rd. Apt 2<br>Carmel, IN 46032                                    |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>HQ Staff              | 245.00                            | 615.00                                 | 5/2/2011               |
| Code __O__<br>Andrew Greider<br>3 Circle Drive<br>Carmel IN 46032   |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Management Fee        | 1500.00                           | 11395.60                               | 5/2/2011               |
| Code __O__<br>Mellow Mushroom<br>2340 E 116th Street<br>Carmel, IN 46032  |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Event Catering        | 1379.68                           | 1379.68                                | 5/3/2011               |
| Code __O__<br>Tangent Resource LLC<br>301 E Carmel Drive Ste C-500<br>Carmel IN 46032                           |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Consulting Management | 5000.00                           | 31659.00                               | 5/3/2011               |
| Code __O__<br>Steve Brumblay<br>520 Lark Drive, Apt 1<br>Carmel, IN 46032                                       |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>HQ Staff              | 175.00                            | 875.00                                 | 5/5/2011               |
| Code __O__<br>Thomas Haley<br>221 S. Rangeline Rd. Apt 2<br>Carmel, IN 46032                                    |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>HQ Staff              | 375.00                            | 990.00                                 | 5/5/2011               |
| Code __O__<br>Ramco Gershenson, Inc.<br>31500 Northwestern Hwy Suite<br>300<br>Farmington Hills, MI 48334       |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Rent on Volunteer HQ  | 3337.87                           | 9537.87                                | 5/5/2011               |
| SUBTOTAL THIS PAGE OF SCHEDULE B  |                                      |  | \$ 12012.55                       |  |                        |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 17a of the Summary Sheet)</i> |                                      |  | \$                                |  |                        |



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (*such as transfers-out from candidate, legislative caucus, political action, or regular party committees*) **MUST** be itemized on this schedule.

FILE NUMBER

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| RECIPIENT'S NAME AND MAILING ADDRESS<br>(street, number, city, state, ZIP code)                             | RECIPIENT'S OCCUPATION        | TYPE OF EXPENDITURE<br>and<br>PURPOSE (be specific)   | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE |
|---|-------------------------------|---|-----------------------------------|--|------------------------|
|   | OFFICE SOUGHT (if applicable) |   |                                   |  |                        |
| Code <u>  O  </u><br>Finsilver Friedman Mgt Co<br>34975 W 12 Mile Rd<br>Farmington Hills, MI 48331          |                               | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Rent on Office           | 2500.00                           | 2500.00                                | 5/5/2011               |
| Code <u>  O  </u><br>AT&T<br>PO Box 8100<br>Aurora IL 60507   |                               | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Utilities Telephone      | 886.53                            | 886.53                                 | 6/17/2011              |
| Code <u>  O  </u><br>Duke Energy<br>PO Box 1326<br>Charlotte NC 28291                                       |                               | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Utilities Electric       | 719.08                            | 719.08                                 | 6/17/2011              |
| Code <u>  O  </u><br>Redirections Sign and Design<br>5157 East 64th Street<br>Indianapolis IN 46220         |                               | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Services on Election Day | 1000.00                           | 1481.50                                | 6/17/2011              |
| Code <u>  A  </u><br>Regal Printing<br>485 Gradle Drive<br>Carmel, IN 46032                                 |                               | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Printing and Mailing     | 251.88                            | 11201.83                               | 6/17/2011              |
| Code <u>  O  </u><br>Ritz Charles Carmel<br>12156 N Meridian St<br>Carmel, IN 46032                         |                               | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Event Catering           | 1530.50                           | 1530.50                                | 6/17/2011              |
| Code <u>  O  </u><br>Stratus Building Solutions<br>8606 Allisonville Rd, Suite 215<br>Indianapolis IN 46250 |                               | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Cleaning Services        | 125.00                            | 125.00                                 | 6/17/2011              |
| SUBTOTAL THIS PAGE OF SCHEDULE B  |                               |   | \$ 7012.99                        |  |                        |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br>(Enter total on ITEM 17a of the Summary Sheet)    |                               |   | \$                                |  |                        |



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (*such as transfers-out from candidate, legislative caucus, political action, or regular party committees*) **MUST** be itemized on this schedule.

FILE NUMBER

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| RECIPIENT'S NAME AND MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>                          | RECIPIENT'S OCCUPATION               | TYPE OF EXPENDITURE<br>and<br>PURPOSE <i>(be specific)</i>  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDI<br>TURE |
|---|--------------------------------------|---|-----------------------------------|--|----------------------------|
|   | OFFICE SOUGHT <i>(if applicable)</i> |   |                                   |  |                            |
| Code <u>  A  </u><br>The ProsperGroup<br>435 East Main Street<br>Greenwood, IN 46143                            |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Internet Email Services      | 697.50                            | 6779.57                                | 6/17/2011                  |
| Code <u>  O  </u><br>United Package Liquors<br>2290 E 116th Street<br>Carmel IN 46032                           |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Event Catering               | 201.83                            | 201.83                                 | 6/17/2011                  |
| Code <u>  F  </u><br>Vine and Table<br>313 E Carmel Drive<br>Carmel IN 46032                                    |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Event Catering               | 1590.64                           | 1590.64                                | 6/17/2011                  |
| Code <u>  A  </u><br>HGCP<br>5110 Briarstone Trace<br>Carmel IN 46033   |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Advertising Creative Mailing | 5000.00                           | 60958.80                               | 6/24/2011                  |
| Code <u>  A  </u><br>Omni Productions<br>12316 Brookshire Pkway<br>PO Box 302<br>Carmel IN 46082                |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Advertising Creative         | 5227.50                           | 5227.50                                | 6/24/2011                  |
| Code <u>  O  </u><br>Andrew Greider<br>3 Circle Drive<br>Carmel IN 46032  |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Expense Reimbursement        | 1164.81                           | 12560.39                               | 6/24/2011                  |
| Code <u>  F  </u><br>Renaissance North Hotel<br>11925 North Meridian Street<br>Carmel, IN 46032                 |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Event Catering               | 924.42                            | 3203.84                                | 6/28/2011                  |
| SUBTOTAL THIS PAGE OF SCHEDULE B  |                                      |   | \$ 14806.70                       |  |                            |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 17a of the Summary Sheet)</i> |                                      |   | \$                                |  |                            |



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE B)  
ITEMIZED EXPENDITURES

**INSTRUCTIONS:** Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient, within a calendar year **MUST** be itemized on this schedule (*over \$200, if regular party committee*). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (*such as transfers-out from candidate, legislative caucus, political action, or regular party committees*) **MUST** be itemized on this schedule.

FILE NUMBER

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| RECIPIENT'S NAME AND MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>                          | RECIPIENT'S OCCUPATION               | TYPE OF EXPENDITURE<br>and<br>PURPOSE <i>(be specific)</i>  | COLUMN A<br>AMOUNT THIS<br>PERIOD | COLUMN B<br>CUMULATIVE<br>YEAR-TO-DATE | DATE OF<br>EXPENDITURE |
|---|--------------------------------------|---|-----------------------------------|--|------------------------|
|   | OFFICE SOUGHT <i>(if applicable)</i> |   |                                   |  |                        |
| Code <u>  </u> O <u>  </u><br>Carmel Drive Self Storage<br>550 W Carmel Drive<br>Carmel IN 46032                |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Sign and Equipment Storage   | 566.00                            | 566.00                                 | 7/2/2011               |
| Code <u>  </u> A <u>  </u><br>HGCP<br>5110 Briarstone Trace<br>Carmel IN 46033                                  |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Advertising Creative Mailing | 5000.00                           | 65958.80                               | 7/21/2011              |
| Code <u>  </u> A <u>  </u><br>Richmarc Productions<br>3710 Washington Blvd.<br>Indianapolis IN 46205            |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Advertising Creative         | 5000.00                           | 5000.00                                | 8/29/2011              |
| Code <u>  </u> O <u>  </u><br>AT&T<br>PO Box 8100<br>Aurora IL 60507  |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Utilities Telephone          | 176.83                            | 1063.36                                | 8/29/2011              |
| Code <u>  </u> F <u>  </u><br>Renaissance North Hotel<br>11925 North Meridian Street<br>Carmel, IN 46032        |                                      | <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:<br>Event Catering               | 815.48                            | 4019.26                                | 8/29/2011              |
| Code <u>  </u> F <u>  </u>  |                                      | <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind<br><input type="checkbox"/> Payment of Debt<br><input type="checkbox"/> Returned Contribution<br><input type="checkbox"/> Other _____<br>Purpose:  |                                   |  |                        |
| SUBTOTAL THIS PAGE OF SCHEDULE B  |                                      |   | \$11558.31                        |  |                        |
| TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 17a of the Summary Sheet)</i> |                                      |   | \$ 139947.50                      |  |                        |



REPORT OF RECEIPTS AND EXPENDITURES  
OF A POLITICAL COMMITTEE  
State Form 4606 (R13/11-05)  
Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D)  
DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER

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| CREDITOR'S OR LENDER'S NAME<br>& MAILING ADDRESS<br><i>(street, number, city, state, ZIP code)</i>             | ENDORSER'S OR VENDOR'S<br>NAME & MAILING ADDRESS <i>(if any)</i><br><i>(street, number, city, state, ZIP code)</i> | AMOUNT           | DATE DEBT<br>INCURRED | CUMULATIVE<br>PAID<br>YEAR-TO-DATE | OUTSTANDING<br>BALANCE THIS<br>PERIOD |
|--|--|------------------|-----------------------|------------------------------------|---------------------------------------|
|  |  | NATURE OF DEBT   |                       |                                    |                                       |
| Richmarc Productions<br>3710 Washington Blvd.<br>Indianapolis IN 46205<br><br>LENDER'S OCCUPATION:             |  | 15,319.00        | 6/4/2011              |                                    |                                       |
|  |  | Video Production |                       |                                    |                                       |
| American Viewpoint<br>300 N Lee Street Suite 400<br>Alexandria, VA 22314<br><br>LENDER'S OCCUPATION:           |  | 4,000.00         | 5/1/2011              |                                    |                                       |
|  |  | Survey Research  |                       |                                    |                                       |
| The ProsperGroup<br>435 East Main Street<br>Greenwood, IN 46143<br><br>LENDER'S OCCUPATION:                    |  | 970.61           | 7/1/2011              |                                    |                                       |
|  |  | Website Hosting  |                       |                                    |                                       |
| LENDER'S OCCUPATION:   |  |                  |                       |                                    |                                       |
|  |  |                  |                       |                                    |                                       |
| LENDER'S OCCUPATION:   |  |                  |                       |                                    |                                       |
|  |  |                  |                       |                                    |                                       |
| LENDER'S OCCUPATION:   |  |                  |                       |                                    |                                       |
|  |  |                  |                       |                                    |                                       |
| LENDER'S OCCUPATION:   |  |                  |                       |                                    |                                       |
|  |  |                  |                       |                                    |                                       |
| SUBTOTAL THIS PAGE OF SCHEDULE D   |  |                  |                       |                                    | \$20,289.61                           |
| TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY<br><i>(Enter total on ITEM 19 of the Summary Sheet)</i> |  |                  |                       |                                    | \$20,289.61                           |